

Montana Department of Agriculture – Organic Certification Program

Organic Handling System Plan

Year: _____

APPLICANT(S)		
BUSINESS NAME (IF DIFFERENT)		
MAILING ADDRESS		
CITY	STATE	ZIP CODE
PRIMARY PHONE NUMBER		ALTERNATE PHONE NUMBER
FAX NUMBER		EMAIL ADDRESS
COUNTY (OR COUNTIES) WHERE FACILITY IS (FACILITIES ARE) LOCATED		MANAGER (IF DIFFERENT FROM THE APPLICANT)
ORGANIZATIONAL STRUCTURE <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> S-CORPORATION <input type="checkbox"/> LIMITED LIABILITY CORPORATION <input type="checkbox"/> CORPORATION <input type="checkbox"/> NON-PROFIT ORGANIZATION <input type="checkbox"/> OTHER:		TAX ID NUMBER OR SOCIAL SECURITY NUMBER

*Please fill out this questionnaire if you are requesting certification as an organic handler (processor, packager, broker, etc.). **Complete all sections of the form, mark "Not Applicable" where appropriate. Failure to complete [all sections of] the form will delay processing your application for certification. Sign this form.** Attach an Organic Product Profile form for each product requested for certification and a current schematic product flow chart and facility map for each facility that will handle organic products. Use additional sheets if necessary. For renewal certification, a renewal form (short form) may be used. Please contact the Montana Department of Agriculture Organic Certification Program if you have any questions or to request additional forms.*

SECTION 1: General Information

The National Organic Program (NOP) rule requires applications for certification to include the name(s) of any organic certifying agent(s) to which application has previously been made; the year(s) of application; the outcome of the application(s) submission, including, when available, a copy of any notification of non-compliance or denial of certification issued to the applicant for certification and a description of the actions taken by the applicant to correct the non-compliances noted in the notification of non-compliance, including evidence of such correction.

Please list, in the table below, any current or past certification agencies applied to, the year(s) of application and the outcome of the application(s). Attach any notification(s) of non-compliance or denial of certification received after October 21, 2002. Include a description of your corrective actions and evidence thereof.

☐ Not Applicable (no current or past certifications)
ATTACH ADDITIONAL SHEETS IF NEEDED.

OTHER CERTIFICATION AGENCIES (current and past)	YEAR(S) OF APPLICATION	OUTCOME OF APPLICATION [Certified (C), Denied (D), Suspended (S), Revoked (R) or other (specify)]

If certification was previously suspended or revoked, attach documentation that the suspension is lifted and / or that you are eligible to re-apply for certification.

In what year was your last complete Organic Handling System Plan (long form) submitted?

Select choice of certification.

- ☐ I am requesting NOP certification only.
- ☐ I am requesting NOP certification plus European (EEC) regulations verification (for export products).
- ☐ I am requesting verification of other _____ standards. (indicate standards desired for verification)

Do you have a copy of current organic standards? ☐ Yes ☐ No

Do you understand the current organic standards?

Do you have a copy of current OMRI Materials List? ☐ Yes ☐ No

☐ Yes ☐ No

Please contact the Montana Department of Agriculture Organic Certification Program (at PO Box 200201, Helena, MT 59620-0201; 406-444-7804; or dcraintree@mt.gov) if you answered no to any of the questions above.

Is this application for a:

☐ Primary, or ☐ Contract handler

Estimated annual total production

_____ % organic _____ % non-organic

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SECTION 1: General Information, *continued*

What type(s) of organic products are handled (processed, packaged or sold) or planned to be handled?

Provide a complete list of products requested for certification in Section 2: Labeling and Product Composition.

If you use outside contract vendors, please complete the table below for each vendor.

ATTACH ADDITIONAL SHEETS IF NEEDED.

☐ Not applicable
(no outside vendors used)

CONTRACT VENDOR	ADDRESS	PHONE NUMBER	CERTIFIED BY

List or attach a list of all non-organic products handled.

☐ Not applicable
(no non-organic products)

Provide detailed directions to the facility from the nearest town or highway intersection (for the inspector):

When is the best time to contact you?

☐ morning ☐ afternoon ☐ evening

When are you available for the inspection?

☐ morning ☐ afternoon ☐ evening

SECTION 2: Labeling and Product Composition

NOP Rule 205.105, 205.270, 205.300, 205.305 and 205.307-205.311

The NOP Rule allows four categories of products to use the word "organic". These are "100% organic", "organic", "made with organic (specified ingredients or food group(s))", and products with less than 70% organic ingredients. The percentage of organic ingredients is calculated by dividing the total net weight or volume of combined organic ingredients by the total weight or volume of all ingredients (excluding salt and water).

Products labeled "100% organic":

- Must contain 100% organic ingredients, including processing aids
- No ingredients may be produced using excluded methods (genetic engineering), sewage sludge, or ionizing radiation

Products labeled "organic":

- Must contain at least 95% organic ingredients
- Non-organic ingredients must not be commercially available in an organic form
- Must not include organic and non-organic forms of the same ingredient
- All synthetic ingredients and processing aids must be on the National List (as allowed).
- Neither organic nor non-organic ingredients may be produced using excluded methods (genetic engineering), sewage sludge, or ionizing radiation
- Refer to the National List, Section 205.605 and 205.606, to determine which non-agricultural substances and non-organically produced agricultural ingredients are allowed

Products labeled "made with organic (specified ingredients or food group(s))":

- Must contain at least 70% organic ingredients
- Neither organic nor non-organic ingredients may be produced using excluded methods (genetic engineering), sewage sludge, or ionizing radiation
- Refer to the National List, Section 205.605 and 205.606, to determine which non-agricultural substances and non-organically produced agricultural ingredients are allowed

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SECTION 2: Labeling and Product Composition, *continued*

Products with less than 70% organic ingredients:

- Can only identify the organic ingredients on the information panel
- The term “organic” may not appear anywhere other than the information panel

The NOP Rule has specific requirements for principal display panel information relating to the use of the term "organic," depending on the percentage of organic ingredients in the finished product. For all products, the organic ingredients must be identified in the ingredient information panel. Up to three ingredients or food groups may be listed on the principal display panel for products labeled as "made with organic (ingredients or food group(s))." The term "organic" may not be used to describe a non-organic ingredient in a product name. Water and salt may not be identified as "organic." The name of the certifying agent (Montana Department of Agriculture) must be identified on the information panel below the name of the handler or distributor, preceded by the statement, "Certified organic by..." or similar phrase.

The USDA seal may be used on "100% organic" or "organic" products, but not on products labeled "made with organic...." The Montana Department of Agriculture (MDA) Organic Certification Program seal can be used on "100% organic," "organic" or "made with organic..." (only on ingredient information panel). Products with less than 70% organic ingredients may not display either the USDA seal or the MDA name, seal or logo. If both seals are used, the MDA seal cannot be displayed more prominently than the USDA seal.

Attach an Organic Product Profile form and examples of all labels used for each product requested for certification.

A. PRODUCTS LABELED AS "100% ORGANIC" (All ingredients are certified organic, including processing aids.)

List all products labeled or planned to be labeled as "100% Organic" and check appropriate boxes.

ATTACH ADDITIONAL SHEETS IF NEEDED.

☐ No "100% Organic Products- **go to section 2B.**

NAME OF PRODUCT (as it appears on the label)	BRAND NAME	ORGANIC INGREDIENTS IDENTIFIED ON INFORMATION PANEL (✓)	MDA IDENTIFIED ON LABEL (✓)	MDA SEAL ON LABEL (✓)	USDA SEAL ON LABEL (✓)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are processing aids used for “100% organic” products? ☐ Yes ☐ No

If yes, list all 100% organic products manufactured using processing aids:

These processing aids must be listed and described on the Product Profile forms.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are all processing aids used with “100% organic” products certified organic? ☐ Yes ☐ No

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SECTION 2: Labeling and Product Composition, *continued*

B. PRODUCTS LABELED AS "ORGANIC" (at least 95% certified organic ingredients)

List all products labeled or planned to be labeled as "organic" and check appropriate boxes.

ATTACH ADDITIONAL SHEETS IF NEEDED.

☐ No [95%] "organic" products- **go to section 2C.**

NAME OF PRODUCT (as it appears on the label)	BRAND NAME	ORGANIC INGREDIENTS IDENTIFIED ON INFORMATION PANEL (✓)	MDA IDENTIFIED ON LABEL (✓)	MDA SEAL ON LABEL (✓)	USDA SEAL ON LABEL (✓)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions pertain only to products in the "organic" label category.

Are any non-organic agricultural ingredients used?

☐ Yes ☐ No

If yes, list the ingredients and all organic products that contain non-organic agricultural ingredients.

ATTACH ADDITIONAL SHEETS IF NEEDED.

If yes, describe your attempts to source an organic form of each ingredient.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any non-agricultural ingredients used?

☐ Yes ☐ No

If yes, list the ingredients and all organic products that contain non-agricultural ingredients.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any ingredients produced using excluded methods, i.e., genetic engineering?

☐ Yes ☐ No

If yes, list all such ingredients and all organic products containing ingredients produced using excluded methods.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any ingredients produced using sewage sludge?

☐ Yes ☐ No

If yes, list all organic products containing ingredients produced using sewage sludge.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any ingredients produced using ionizing radiation?

☐ Yes ☐ No

If yes, list all organic products containing ingredients produced using ionizing radiation.

ATTACH ADDITIONAL SHEETS IF NEEDED.

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SECTION 2B. Products labeled as "organic," *continued*

Are any processing aids used?

☐ Yes ☐ No

If yes, list all organic products manufactured using processing aids and give name of the processing aid(s) used for each product.

All processing aids must be listed and described on Product Profile forms.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are sulfites, nitrates or nitrites added during the production or handling process?

☐ Yes ☐ No

If yes, list all organic products produced with sulfites, nitrates or nitrites.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any organic products produced using organic and non-organic forms of the same ingredients?

☐ Yes ☐ No

If yes, list all organic products using organic and non-organic forms of the same ingredients.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Do any products labeled "organic" show the percentage of organic ingredients on the label?

☐ Yes ☐ No

If yes, list all products so labeled and the percentage as displayed on the label.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Does the size of the percentage statement exceed one-half the size of the largest type (font) on the panel on which the statement is displayed?

☐ Yes ☐ No

Does the percentage statement appear in its entirety in the same type size, style, and color without highlighting?

☐ Yes ☐ No

C. PRODUCTS LABELED AS "MADE WITH ORGANIC (SPECIFIED INGREDIENTS OR FOOD GROUPS(S))"

(At least 70% certified organic ingredients; up to three ingredients or food groups can be listed)

List all products labeled or planned to be labeled "Made with organic..." and check appropriate boxes.

ATTACH ADDITIONAL SHEETS IF NEEDED.

☐ No "Made with organic (ingredients or food group(s))" products- **go to section 2D.**

NAME OF PRODUCT (as it appears on the label)	BRAND NAME	LIST EACH INGREDIENT AND / OR FOOD GROUP LISTED ON THE <u>PRINCIPAL DISPLAY PANEL</u>	NUMBER OF INGREDIENTS OR FOOD GROUPS	ORGANIC INGREDIENTS IDENTIFIED ON INFORMATION PANEL (✓)	MDA NAME ON LABEL (✓)	MDA SEAL ON LABEL (✓)
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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SECTION 2C. Products labeled as "Made with Organic (specified ingredients or food groups(s))," *continued*

The following questions pertain only to products in the "Made with organic..." label category.

Are any non-organic agricultural ingredients used?

☐ Yes ☐ No

If yes, list the ingredients and all organic products that contain non-organic agricultural ingredients.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any non-agricultural ingredients used?

☐ Yes ☐ No

If yes, list the ingredients and all organic products that contain non-agricultural ingredients.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any processing aids used?

☐ Yes ☐ No

If yes, list all organic products manufactured using processing aids and give name of processing aid(s) used for each product.

ATTACH ADDITIONAL SHEETS IF NEEDED.

All processing aids must be listed and described on Product Profile forms.

Are any ingredients produced using excluded methods, i.e., genetic engineering?

☐ Yes ☐ No

If yes, list all such ingredients and all products containing ingredients produced using excluded methods.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any ingredients produced using sewage sludge?

☐ Yes ☐ No

If yes, list all products containing ingredients produced using sewage sludge.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Are any ingredients produced using ionizing radiation?

☐ Yes ☐ No

If yes, list all products containing ingredients produced using ionizing radiation.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Do any products labeled "Made with organic..." show the percentage of organic ingredients on the label?

☐ Yes ☐ No

If yes, list all products so labeled and the percentage as displayed on the label.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Does the size of the percentage statement exceed one-half the size of the largest type (font) on the panel on which the statement is displayed?

☐ Yes ☐ No

Does the percentage statement appear in its entirety in the same type size, style, and color without highlighting?

☐ Yes ☐ No

D. PRODUCTS WITH LESS THAN 70% ORGANIC INGREDIENTS (organic ingredients listed only on the information panel)

List all products that contain less than 70% organic ingredients.

☐ None (no less than 70% products)

ATTACH ADDITIONAL SHEETS IF NEEDED.

E. WASTE PRODUCTS

Will any wastes from certified organic products be sold as certified organic?

☐ Yes ☐ No

If yes, list all organic products manufactured from waste materials.

Attach an Organic Product Profile form for each product.

ATTACH ADDITIONAL SHEETS IF NEEDED.

F. WATER

Check ways water is used in processing:

☐ no water used- **go to section 3.**

☐ ingredient ☐ processing aid ☐ cooking ☐ cooling ☐ product transport ☐ cleaning organic products
☐ cleaning equipment ☐ other (specify):

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SECTION 2F. Water, continued

Source(s) of water (check all that apply): ☐ municipal ☐ on-site well ☐ other (specify):

Does the water comply with the Safe Drinking Water Act standards? ☐ Yes ☐ No

Attach copy of water test, if applicable.

List any known water contaminants. ☐ None

What on-site water treatment processes are used? ☐ None

Is steam used in the processing of organic products? ☐ Yes ☐ No

If yes, describe how steam is used in the manufacturing process.

If steam has direct contact with organic products, do you use: ☐ Not applicable (no direct stream contact)

☐ steam fillers ☐ condensate traps ☐ testing of condensate ☐ testing of finished products ☐ other (specify):

List products used as boiler additives. ☐ No boiler additives used

Attach MSDS and / or label information for boiler additives, if applicable.

ATTACH ADDITIONAL SHEETS IF NEEDED.

Do you use water conservation strategies? ☐ Yes ☐ No

If yes, describe your water conservation program.

Describe how you monitor water quality.

How often do you conduct water quality monitoring? ☐ weekly ☐ monthly ☐ annually ☐ as needed
☐ other (specify):

SECTION 3: Assurance of Organic Integrity

NOP Rule 205.270 and 205.272

The NOP Rule requires that handling procedures, processes, storage, and equipment present no risk to organic products for commingling with non-organic products or contamination with prohibited substances. Packaging materials, bins, and storage containers must not have contained synthetic fungicides, preservatives, or fumigants. Reusable bags or containers must be clean and pose no risk to the integrity of organic products. Procedures used to maintain organic integrity must be documented. This documentation must be available for inspection.

A. PRODUCT FLOW

Attach a complete written description or schematic product flow chart that shows the movement of all organic products, from incoming / receiving through production to outgoing / shipping. The product flow chart should indicate where all ingredients are added and / or processing aids are used. All equipment and storage areas must be identified.

B. ORGANIC CONTROL POINTS

Similar to Hazard Analysis Critical Control Points (HACCP), Organic Control Points (OCP's) are points in a production or handling system where the integrity of the organic product may be compromised. Examples are improper cleaning of a piece of equipment prior to running organic product, resulting in commingling with non-organic products left in the equipment, or use of a prohibited pesticide when organic product is present, resulting in contamination by a prohibited substance.

Do you have an Organic Control Point (OCP) program in place to address areas of potential commingling with non-organic products and / or contamination with prohibited substances? ☐ Yes ☐ No

If yes, list OCP's identified in your process(es) and state how you have addressed them to protect organic integrity (or attach a copy of your Organic Control Point program description).

If no, do you have plans to implement an Organic Control Point program? ☐ Yes ☐ No

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SECTION 3: Assurance of Organic Integrity, *continued*

C. MONITORING

Do you have a Quality Assurance program in place? ☐ Yes ☐ No

If yes, what program do you use? ☐ ISO ☐ HACCP ☐ TQM ☐ other (specify):

Are any outside quality assessment services used (i.e. AIB)? ☐ Yes ☐ No

If yes, list the name and contact information of the company:

Do you conduct any product testing: (Check all that apply) ☐ No product testing

- ☐ ingredients tested prior to purchase ☐ ingredients tested upon receipt ☐ products tested during production
☐ finished products tested ☐ other (specify):

How do you prevent the use of ingredients produced using excluded methods (i.e. genetic engineering), sewage sludge, or ionizing radiation? (Check all that apply):

- ☐ GE testing ☐ letters from manufacturers ☐ other (specify):

Are ingredient samples retained? ☐ Yes ☐ No

If yes, for how long?

Are finished product samples retained? ☐ Yes ☐ No

If yes, for how long?

Do you have a product recall system in place? ☐ Yes ☐ No

If yes, describe recall system (or attach recall system description):

D. EQUIPMENT

List all equipment used in processing

☐ Not Applicable (no equipment used)

ATTACH ADDITIONAL SHEETS IF NEEDED.

EQUIPMENT NAME	LIST TYPE(S) OF PRODUCT(S) EQUIPMENT IS USED WITH	CAPACITY	IS EQUIPMENT CLEANED PRIOR TO ORGANIC HANDLING (✓)	IS CLEANING DOCUMENTED (✓)	IS EQUIPMENT PURGED PRIOR TO ORGANIC HANDLING (✓)
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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SECTION 3D. Equipment, *continued*

If equipment is purged, describe purge procedures, quantities purged, and documentation. ☐ Not Applicable (no purging)

Documentation must be available for inspection.

ATTACH ADDITIONAL SHEETS IF NEEDED.

E. SANITATION

Attach MSDS and / or label information for cleaning and sanitizing products, if applicable.

Check all cleaning methods used:

- ☐ sweeping ☐ scraping ☐ vacuuming ☐ compressed air ☐ manual washing ☐ clean in place (CIP)
☐ steam cleaning ☐ sanitizing ☐ other (specify):

When and how often is cleaning done?

Are all surfaces that contact organic products food grade surfaces? ☐ Yes ☐ No ☐ Not Applicable
 If no, list non-food grade surfaces that contact organic food products. (do not handle food products)

If cleaning products are used, how is contact with organic products prevented?

Do you test food contact surfaces or rinsate for cleaner / sanitizer residues? ☐ Yes ☐ No

Where are cleaning / sanitizing materials stored? ☐ Not Applicable (no cleaning / sanitizing materials used)

Provide information on your cleaning program and products used:

ATTACH ADDITIONAL SHEETS IF NEEDED.

AREA	TYPE OF CLEANING	CLEANING EQUIPMENT USED	FREQUENCY (how often is area cleaned?)	IS CLEANING DOCUMENTED (✓)	CLEANING PRODUCTS USED
Receiving				<input type="checkbox"/>	
Ingredient storage				<input type="checkbox"/>	
Product transfer				<input type="checkbox"/>	
Production				<input type="checkbox"/>	
Production equipment				<input type="checkbox"/>	
Packaging				<input type="checkbox"/>	
Finished product storage				<input type="checkbox"/>	
Loading dock				<input type="checkbox"/>	
Building exterior				<input type="checkbox"/>	
Accidental spills				<input type="checkbox"/>	
Other (specify):				<input type="checkbox"/>	

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SECTION 3: Assurance of Organic Integrity, *continued*

F. PACKAGING

Check types of packaging material used: ☐ bulk (no packaging) ☐ paper ☐ cardboard ☐ wood ☐ glass ☐ metal
☐ foil ☐ plastic ☐ waxed paper ☐ aseptic ☐ natural fiber ☐ synthetic fiber ☐ other (specify):

Are all packaging materials food grade? ☐ Yes ☐ No ☐ Not Applicable (do not handle food products)
 If no, list non-food grade packaging materials that contact organic food products.

Where are packaging materials stored? ☐ Not Applicable (no packaging materials used)

Are any fungicides, fumigants or pest control products used in the packaging materials storage area(s)? ☐ Yes ☐ No
 If yes, describe their use and list products used. ATTACH ADDITIONAL SHEETS IF NEEDED.

Have any packaging materials been exposed to synthetic fungicides, preservatives, or fumigants? ☐ Yes ☐ No
 If yes, list packaging materials exposed, organic products involved, describe exposure and give name(s) of products used.

Are packaging materials reused? ☐ Yes ☐ No ☐ Not Applicable (no packaging materials used)
 If yes, describe how reusable packaging materials are cleaned prior to use.

Are reusable packaging materials used for both organic and non-organic products? ☐ Yes ☐ No
 If yes, list specific non-organic products packaged: ☐ Not Applicable (no packaging materials re-used)

G. STORAGE

Provide information on your storage areas by completing the following table.

ATTACH ADDITIONAL SHEETS IF NEEDED.

USE	LOCATION (reference facility map)	ID (name / number)	SIZE / CAPACITY	TYPE (Description)	COMMENTS ON POTENTIAL FOR CONTAMINATION OR COMMINGLING PROBLEMS
Ingredient storage					
Packaging material storage					
In-process storage					
Finished product storage					
Off-site storage*					
Other (specify):					

*If there is off-site storage, give name, address, phone number, contact person and type of products stored off-site (include all sites).

☐ Not Applicable (no off-site storage)

ATTACH ADDITIONAL SHEETS IF NEEDED.

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SECTION 3: Assurance of Organic Integrity, *continued*

H. TRANSPORTATION OF ORGANIC PRODUCTS

In-coming:

In what forms are in-coming products received?

- ☐ dry bulk ☐ liquid bulk ☐ tote bags ☐ tote boxes ☐ metal drums ☐ cardboard drums ☐ paper bags
☐ foil bags ☐ other (specify):

How are in-coming products transported?

Do you arrange in-coming product transportation?

☐ Yes ☐ No

If yes, how do you insure that inbound transport units are cleaned prior to loading organic products?

Is the inspection / cleaning process for in-coming transport units documented? ☐ Yes ☐ No

Are transport units used to carry any prohibited substances? ☐ Yes ☐ No

Have transport companies been notified of organic handling requirements? ☐ Yes ☐ No

Are organic products shipped at the same time as non-organic in the same transport units? ☐ Yes ☐ No

Check all steps taken to segregate in-coming organic products:

- ☐ dedicated (organic-only) transport units ☐ use of (dedicated) pallets ☐ pallet tags identifying "organic"
☐ organic product shrink wrapped ☐ separate area in transport unit ☐ other (specify):

In-Process: Describe the movement of products within your facility.

How are in-process products transported?

How do you insure that in-process transport units are cleaned prior to loading organic products?

Is the inspection / cleaning process documented for in-process transport? ☐ Yes ☐ No

Outgoing Finished Product:

In what form are finished products shipped (check all that apply)?

- ☐ dry bulk ☐ liquid bulk ☐ tote bags ☐ tote boxes ☐ paper bags ☐ foil bags ☐ metal drums
☐ mesh bags ☐ cardboard drums ☐ cardboard cases ☐ plastic crates ☐ other (specify):

How are outgoing products transported?

Do you arrange outgoing product transportation? ☐ Yes ☐ No

How do you insure that outgoing transport units are clean prior to loading organic products?

Is the inspection / cleaning process documented? ☐ Yes ☐ No

Are transport units used to carry any prohibited materials? ☐ Yes ☐ No

Have transport companies been notified of organic handling requirements? ☐ Yes ☐ No

Are organic products shipped at the same time as non-organic in the same transport units? ☐ Yes ☐ No

Check steps taken to segregate organic (finished) products:

- ☐ dedicated (organic-only) transport units ☐ use of (dedicated) pallets ☐ pallet tags identifying "organic"
☐ organic product shrink wrapped ☐ separate area in transport unit ☐ other (specify):

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SECTION 4: Pest Management

NOP Rule 205.271

The NOP Rule requires management practices to prevent pests, such as removal of pest habitat, food sources, and breeding area, and prevention of access to handling facilities. Environmental factors, such as temperature, light, humidity, atmosphere, and air circulation, may be managed to control pests. Pests may be controlled using mechanical or physical means, such as traps, light, or sound. Lures and repellents may be used if they do not contain prohibited substances or products produced using excluded methods (genetic engineered). If these measures are not effective, a prohibited synthetic substance not on the National List may be used provided the MDA approves of the substance, method of application, and measures taken to prevent contact with ingredients or organic products. THIS APPROVAL MUST BE GRANTED BEFORE ANY PROHIBITED SUBSTANCES ARE USED IN AN ORGANIC FACILITY. Use of pest control products must be documented and included as part of the Organic Handling System Plan.

Attach a facility map, showing the location of traps and monitors, and MSDS and / or label information for all substances used for pest control. These must also be available for inspection.

A. MANAGEMENT AND MONITORING

What type of pest management system do you use?

- ☐ in-house: name of responsible person: _____
- ☐ contract pest control service (list contact information):

Name: _____

Address: _____

Phone: _____

Check all pest problems you generally have:

- ☐ flying insects ☐ crawling insects ☐ rats ☐ mice ☐ spiders ☐ birds ☐ other (specify):

How are pests monitored?

Are records kept of your pest monitoring activities? ☐ Yes ☐ No

Pest monitoring records should be available for inspection.

B. PRACTICES

Check all pest management practices you use:

- ☐ good sanitation ☐ removal of exterior habitat / food sources ☐ cleanup of spilled product ☐ exclusion
- ☐ sealed doors and / or windows ☐ repair of holes, cracks, etc. ☐ screened windows, vents, etc. ☐ physical barriers
- ☐ sheet metal on sides of building exterior ☐ mowing ☐ air curtains ☐ air showers ☐ positive air pressure in facility
- ☐ monitoring ☐ incoming ingredient inspection for pests ☐ inspection zones around interior perimeter
- ☐ ultrasound / light devices ☐ release of beneficials ☐ sticky traps ☐ electrocutors ☐ pheromone traps
- ☐ mechanical traps ☐ scare eye balloons ☐ freezing treatments ☐ heat treatments ☐ vacuum treatments
- ☐ carbon dioxide ☐ nitrogen ☐ vitamin baits ☐ pyrethrum ☐ ryania ☐ rotenone ☐ boric acid
- ☐ disodium octal tetrahydrate ☐ diatomaceous earth ☐ precipitated silica ☐ fumigation ☐ fogging
- ☐ crack and crevice spray ☐ other (specify):

Rate the effectiveness of your pest management program: ☐ excellent ☐ satisfactory ☐ needs improvement

What changes do you anticipate?

C. WASTE MANAGEMENT

Does your waste management system provide habitat and / or food sources for pests? ☐ Yes ☐ No

If yes, please describe.

Check all aspects of your waste management system that apply:

- ☐ on-site dumpster ☐ material recycling ☐ daily pick-up of waste ☐ composting ☐ field application of waste
- ☐ other (specify):

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SECTION 4: Pest Management, *continued*

D. PESTICIDES

Are records kept of all pesticide applications? ☐ Yes ☐ No ☐ Not Applicable (no pesticides used) – *go to section 5.*
Pest monitoring records should be available for inspection.

Are any prohibited substances used for pest control ☐ Yes ☐ No
 If yes, what measures are you taking or planning to take to prevent their use in the future?

If yes, list all measures taken to prevent contact with organic products and / or ingredients.

If yes, did you contact the MDA (and receive approval) prior to using the prohibited substance(s)? ☐ Yes ☐ No

List all pesticides used for the last 12 months (include both allowed and prohibited products): ATTACH ADDITIONAL SHEETS IF NEEDED.

SUBSTANCE	BRAND NAME	STATUS: APPROVED (A) RESTRICTED (R) PROHIBITED (P)	TARGET PEST(S)	LOCATION(S) WHERE USED	METHOD OF APPLICATION	DATE OF LAST APPLICATION

Are there any pesticides intended for use that are not listed above? ☐ Yes ☐ No

If yes, list:

ATTACH ADDITIONAL SHEETS IF NEEDED.

SUBSTANCE	BRAND NAME	STATUS: APPROVED (A) RESTRICTED (R), PROHIBITED (P)	TARGET PEST(S)	LOCATION(S) WHERE USED	METHOD OF APPLICATION	DATE OF LAST APPLICATION

If you use or plan to use restricted (R) substances for pest control, how do you comply with the "annotation?"

☐ Not applicable (no restricted substances used or planned for use)

ATTACH ADDITIONAL SHEETS IF NEEDED.

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SECTION 5: Record Keeping

NOP Rule 205.103

The NOP Rule requires that records disclose all activities and transactions of the operation, be maintained for five years and demonstrate compliance with the NOP Rule. Organic products must be tracked from receipt of incoming ingredients to sale of finished product. Organic ingredients must be verified as certified organic. Amounts of organic finished products must balance with amounts of certified organic ingredients purchased. All relevant documents must identify products as "organic." All records must be accessible to the inspector.

Can your record keeping system track finished products back to all ingredients? ☐ Yes ☐ No

Can your record keeping system balance organic ingredients in with organic products out? ☐ Yes ☐ No

How long do you keep your records?

Which of the following records do you keep for organic processing / handling?

Incoming:

- ☐ purchase orders ☐ contracts ☐ invoices ☐ receipts ☐ bills of lading ☐ Customs forms ☐ scale tickets
- ☐ quality test results ☐ Certificates of Analysis ☐ Transaction Certificates
- ☐ copies of Certificates of Organic Operation (for suppliers) ☐ non-GMO verification of ingredients
- ☐ verification that ingredients are not produced using sewage sludge
- ☐ verification that ingredients are produced / handled without ionizing radiation
- ☐ receiving records ☐ receiving summary log
- ☐ documentation of commercial unavailability of organic ingredients when using non-organic ingredients for products labeled as "100% organic" and/or "organic"
- ☐ other (specify):

In-Process:

- ☐ ingredient inspection forms ☐ blending reports ☐ production reports ☐ equipment clean-out logs
- ☐ sanitation logs ☐ packaging reports ☐ QA reports ☐ production summary records
- ☐ other (specify):

Storage:

- ☐ ingredient inventory reports ☐ finished product inventory reports ☐ other (specify):

Outgoing:

- ☐ shipping log ☐ transport unit inspection/cleaning forms ☐ bills of lading ☐ scale tickets ☐ purchase orders
- ☐ sales orders ☐ sales invoices ☐ phytosanitary certificates ☐ export declaration forms
- ☐ Transaction Certificates ☐ copies of Certificates of Organic Operation ☐ shipping summary log
- ☐ sales summary log ☐ audit control register ☐ complaint log ☐ other (specify):

Other:

- ☐ complaints to organic operators

Describe your lot numbering system (include an example lot number).

Please have all records available for inspection.

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SECTION 6: Affirmation

NOP Rule 205.100, 205.400 and 205.401

I affirm that all statements made in this application are true and correct. I agree to comply with the Organic Foods Production Act of 1990, National Organic Program (NOP) Rules and Regulations and all other program rules as provided with the application. I understand that the facility may be subject to unannounced inspection and that organic products may be sampled and tested for residues at any time. I understand that acceptance of this form in no way implies granting of certification by the Montana Department of Agriculture Organic Certification Program. I agree to provide further information as required by the Montana Department of Agriculture and / or the USDA-NOP.

Signature of Applicant _____ **Date of submission** _____

Verification of Changes to the Organic Handling System Plan:

*If you have made any changes to this Organic Handling System Plan after submission to the Montana Department of Agriculture (including changes entered by MDA staff at your direction and those made during your inspection), **please sign and date below** to verify that you agree to the changes, that you agree to follow the Organic Handling System Plan as amended and that you agree to notify the Montana Department of Agriculture of any further changes to the plan. **PLEASE DO NOT SIGN BELOW UNLESS YOU ARE MAKING CHANGES TO THE FORM AFTER INITIAL SUBMISSION.***

Signature of Applicant _____ **Date** _____

I have attached the following additional documents:

- | | | |
|--|--|---|
| <input type="checkbox"/> Notice(s) of non-compliance or denial of certification from other certifying agencies | | |
| <input type="checkbox"/> Description of corrective actions taken regarding past non-compliances | | |
| <input type="checkbox"/> Notice of eligibility for certification (if previously suspended or revoked) | | |
| <input type="checkbox"/> product flow chart | <input type="checkbox"/> facility map | <input type="checkbox"/> Organic Product Profiles |
| <input type="checkbox"/> pest management map of traps and monitors | <input type="checkbox"/> water test results, if applicable | <input type="checkbox"/> MSDS, if applicable |
| <input type="checkbox"/> organic product labels | <input type="checkbox"/> labels for minor ingredients | |
| <input type="checkbox"/> labels for other substances used (boiler additives, cleansers, or pesticides) | | |
| <input type="checkbox"/> other (specify): | | |

- ☐ I have made copies of this form and all supporting documents for my own records.

Submit completed form, fees, and supporting documents to:

Montana Department of Agriculture
Organic Certification Program
P.O. Box 200201
Helena, MT 59620-0201